

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 RHODE ISLAND

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>29,659</b>	<b>13,390</b>	<b>15,923</b>	<b>328</b>	<b>3</b>	<b>15</b>	<b>323,531</b>	<b>141,744</b>	<b>180,484</b>	<b>1,131</b>	<b>26</b>	<b>146</b>
<b>Age</b>												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	2	0	2	0	0	0	20	0	20	0	0	0
15-20	33	0	32	0	1	0	269	0	265	0	4	0
21-44	5,306	0	5,118	184	1	3	58,350	0	57,737	575	12	26
45-64	7,193	1	7,066	117	0	9	80,226	12	79,647	474	0	93
65-74	6,380	3,655	2,699	22	1	3	70,568	39,164	31,293	74	10	27
75-84	6,024	5,204	817	3	0	0	65,512	56,078	9,428	6	0	0
85 and older	4,721	4,530	189	2	0	0	48,586	46,490	2,094	2	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Gender</b>												
Female	19,328	10,186	8,955	172	0	15	211,428	108,486	102,221	575	0	146
Male	10,331	3,204	6,968	156	3	0	112,103	33,258	78,263	556	26	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Race</b>												
White	19,060	7,942	10,922	180	1	15	210,635	84,882	124,976	627	4	146
African American	1,798	476	1,294	28	0	0	19,761	5,246	14,416	99	0	0
Other/unknown	8,801	4,972	3,707	120	2	0	93,135	51,616	41,092	405	22	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	4,539	3,272	1,267	0	0	0	51,078	36,098	14,980	0	0	0
Part year	2,676	2,091	585	0	0	0	25,220	18,998	6,222	0	0	0
None	22,444	8,027	14,071	328	3	15	247,233	86,648	159,282	1,131	26	146
<b>Maintenance Assistance Status</b>												
Cash	15,619	4,658	10,947	14	0	0	177,483	51,967	125,481	35	0	0
Medically needy	260	163	97	0	0	0	2,724	1,683	1,041	0	0	0
Poverty-related	157	68	73	1	0	15	1,626	716	762	2	0	146
Other/unknown	13,623	8,501	4,806	313	3	0	141,698	87,378	53,200	1,094	26	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	29,197	13,086	15,770	323	3	15	318,499	138,432	178,797	1,098	26	146
Full dual, part year	462	304	153	5	0	0	5,032	3,312	1,687	33	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	29,170	13,366	15,749	38	2	15	321,404	141,596	179,397	243	22	146
FFS part year, with Rx claims	331	21	148	161	1	0	1,752	135	951	662	4	0
FFS part year, no Rx claims	158	3	26	129	0	0	375	13	136	226	0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2004. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE D.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>89.4 %</b>	<b>44.8</b>	<b>\$3,311</b>	<b>\$74</b>	<b>\$19,743</b>	<b>16.8 %</b>	<b>29,659</b>
<b>Age</b>							
5 and younger	0.0	0.0	0	0	0	0.0	0
6-14	100.0	46.5	1,135	24	2,706	41.9	2
15-20	66.7	12.4	1,172	95	11,957	9.8	33
21-44	84.6	35.7	3,540	99	17,781	19.9	5,306
45-64	90.4	50.4	4,427	88	22,466	19.7	7,193
65-74	88.4	41.7	2,872	69	13,367	21.5	6,380
75-84	90.2	46.0	2,844	62	18,182	15.6	6,024
85 and older	93.9	49.4	2,557	52	28,469	9.0	4,721
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	90.0	44.8	2,634	59	20,405	12.9	13,390
Disabled	89.6	45.6	3,932	86	19,533	20.1	15,923
Adults	54.6	10.4	708	68	3,082	23.0	328
Children	100.0	59.7	2,030	34	16,411	12.4	3
Unknown	93.3	41.7	5,087	122	17,561	29.0	15
<b>Gender</b>							
Female	92.2	48.7	3,341	69	19,044	17.5	19,328
Male	84.3	37.6	3,253	87	21,051	15.5	10,331
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	91.0	49.7	3,709	75	23,544	15.8	19,060
African American	86.8	37.1	3,080	83	11,693	26.3	1,798
Other/unknown	86.6	35.8	2,495	70	13,156	19.0	8,801
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	94.5	67.4	4,059	60	74,832	5.4	4,539
Part year	95.0	54.5	3,267	60	30,271	10.8	2,676
None	87.8	39.1	3,164	81	7,347	43.1	22,444
<b>Maintenance Assistance Status</b>							
Cash	88.7	40.5	3,218	80	12,369	26.0	15,619
Medically needy	96.5	58.9	4,134	70	40,012	10.3	260
Poverty related	74.5	17.8	1,541	87	4,508	34.2	157
Other/unknown	90.3	49.8	3,421	69	27,987	12.2	13,623

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.3 includes beneficiaries represented by Cell G of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ <sup>d</sup>	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
<b>All</b>	<b>4.1</b>	<b>\$304</b>	<b>16.8 %</b>	<b>10.6 %</b>	<b>16.9 %</b>	<b>12.7 %</b>	<b>31.6 %</b>	<b>23.1 %</b>	<b>5.2 %</b>	<b>\$1,810</b>	<b>29,659</b>	<b>323,531</b>
<b>Age</b>												
5 and younger	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
6-14	4.7	114	41.9	0.0	0.0	0.0	100.0	0.0	0.0	271	2	20
15-20	1.5	144	9.8	33.3	30.3	18.2	12.1	3.0	3.0	1,467	33	269
21-44	3.2	322	19.9	15.4	24.5	13.3	27.1	16.3	3.4	1,617	5,306	58,350
45-64	4.5	397	19.7	9.6	13.9	11.9	32.4	25.7	6.6	2,014	7,193	80,226
65-74	3.8	260	21.5	11.6	19.5	14.3	30.6	19.1	4.9	1,209	6,380	70,568
75-84	4.2	262	15.6	9.8	15.1	12.7	32.7	24.3	5.4	1,672	6,024	65,512
85 and older	4.8	249	9.0	6.1	11.5	11.2	35.2	30.6	5.4	2,766	4,721	48,586
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	4.2	249	12.9	10.0	15.7	12.6	32.2	24.2	5.3	1,928	13,390	141,744
Disabled	4.0	347	20.1	10.4	17.9	12.9	31.2	22.3	5.2	1,723	15,923	180,484
Adults	3.0	205	23.0	45.4	14.6	6.7	20.1	10.1	3.0	894	328	1,131
Children	6.9	234	12.4	0.0	0.0	33.3	0.0	66.7	0.0	1,894	3	26
Unknown	4.3	523	29.0	6.7	13.3	40.0	13.3	20.0	6.7	1,804	15	146
<b>Gender</b>												
Female	4.4	305	17.5	7.8	14.9	12.5	33.3	25.5	5.9	1,741	19,328	211,428
Male	3.5	300	15.5	15.7	20.6	13.1	28.2	18.5	3.9	1,940	10,331	112,103
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	4.5	336	15.8	9.0	14.5	11.8	32.0	26.3	6.4	2,131	19,060	210,635
African American	3.4	280	26.3	13.2	22.6	13.7	30.6	16.2	3.6	1,064	1,798	19,761
Other/unknown	3.4	236	19.0	13.4	20.8	14.5	30.7	17.5	3.0	1,243	8,801	93,135
<b>use of nursing Facilities<sup>f</sup></b>												
Entire year	6.0	361	5.4	5.5	4.6	6.9	31.2	40.6	11.2	6,650	4,539	51,078
Part year	5.8	347	10.8	5.0	8.5	8.7	33.7	34.8	9.3	3,212	2,676	25,220
None	3.5	287	43.1	12.2	20.4	14.4	31.4	18.1	3.5	667	22,444	247,233
<b>Maintenance Assistance Status</b>												
Cash	3.6	283	26.0	11.3	20.7	14.3	31.3	18.9	3.6	1,089	15,619	177,483
Medically needy	5.6	395	10.3	3.5	8.5	11.2	34.2	32.7	10.0	3,819	260	2,724
Poverty related	1.7	149	34.2	25.5	33.8	19.1	15.9	5.1	0.6	435	157	1,626
Other/unknown	4.8	329	12.2	9.7	12.5	10.9	32.0	27.9	7.0	2,691	13,623	141,698

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

- a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
- d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
- e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Characteristics	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>4.1</b>	<b>\$304</b>	<b>\$74</b>	<b>1.8</b>	<b>\$229</b>	<b>\$128</b>	<b>0.2</b>	<b>\$20</b>	<b>\$93</b>	<b>2.1</b>	<b>\$54</b>	<b>\$26</b>
<b>Age</b>												
5 and younger	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
6-14	4.7	114	24	1.5	67	46	0.0	0	0	3.2	47	15
15-20	1.5	144	95	0.8	116	145	0.1	13	106	0.6	14	25
21-44	3.2	322	99	1.4	245	172	0.2	25	122	1.6	52	32
45-64	4.5	397	88	2.0	300	150	0.3	29	114	2.3	68	30
65-74	3.8	260	69	1.7	196	115	0.2	16	87	1.9	48	26
75-84	4.2	262	62	1.8	198	107	0.2	14	73	2.2	49	23
85 and older	4.8	249	52	1.9	184	97	0.2	14	55	2.6	51	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	4.2	249	59	1.8	188	104	0.2	14	67	2.2	47	21
Disabled	4.0	347	86	1.8	262	148	0.2	25	111	2.0	60	30
Adults	3.0	205	68	1.3	140	108	0.2	29	137	1.5	37	25
Children	6.9	234	34	1.8	169	95	0.3	13	36	4.8	53	11
Unknown	4.3	523	122	1.8	418	229	0.3	44	162	2.2	61	28
<b>Gender</b>												
Female	4.4	305	69	1.9	230	119	0.2	20	84	2.3	56	25
Male	3.5	300	87	1.5	228	150	0.2	21	113	1.8	51	29
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	4.5	336	75	1.9	252	130	0.2	23	95	2.3	60	26
African American	3.4	280	83	1.5	218	149	0.2	17	105	1.7	45	26
Other/unknown	3.4	236	70	1.5	180	120	0.2	14	84	1.7	42	25
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	6.0	361	60	2.5	274	111	0.3	22	65	3.2	65	20
Part year	5.8	347	60	2.4	261	111	0.3	22	73	3.1	64	21
None	3.5	287	81	1.6	216	137	0.2	19	106	1.8	51	29
<b>Maintenance Assistance Status</b>												
Cash	3.6	283	80	1.6	214	135	0.2	18	102	1.8	51	29
Medically needy	5.6	395	70	2.3	294	131	0.3	31	95	3.0	70	23
Poverty related	1.7	149	87	0.7	114	163	0.1	11	105	0.9	23	25
Other/unknown	4.8	329	69	2.0	248	122	0.3	22	85	2.5	58	24

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

- a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called “innovator single-source drugs,” are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called “innovator multiple-source drugs,” are brand-name drugs whose patents have expired. Generic drugs, sometimes called “non-innovator multiple-source drugs,” are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Users <sup>e</sup>		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$32	\$25	\$2	\$4	\$101	\$197	\$120	\$27	54,092	\$5,483,645	15,158	51.1 %	172,159
Biologicals	0.5	0.0	0.0	0.5	####	0	0	####	3009	0	0	3,009	6	18,054	1	0.0	12
Antineoplastic Agents	0.5	0.2	0.0	0.4	85	58	1	27	156	368	171	69	5,443	846,845	930	3.1	9,967
Endocrine/Metabolic Drugs	0.8	0.3	0.1	0.4	47	35	3	9	61	108	46	24	110,423	6,728,890	12,655	42.7	143,262
Cardiovascular Agents	1.3	0.6	0.0	0.7	71	52	3	16	54	95	66	22	280,916	15,100,536	18,916	63.8	212,169
Respiratory Agents	0.8	0.6	0.0	0.2	48	44	0	3	62	79	55	16	95,246	5,942,563	10,865	36.6	123,866
Gastrointestinal Agents	0.7	0.3	0.0	0.4	65	48	2	15	88	142	82	40	105,368	9,246,895	12,551	42.3	141,505
Genitourinary Agents	0.5	0.4	0.0	0.1	36	32	1	2	68	80	47	25	25,618	1,754,462	4,279	14.4	48,341
CNS Drugs	1.4	0.6	0.1	0.7	133	101	8	24	94	169	105	33	273,142	25,630,266	17,209	58.0	192,687
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.2	66	54	2	11	111	160	95	44	3,317	367,657	493	1.7	5,564
Miscellaneous Psychological/																	
Neurological Agents	0.8	0.8	0.0	0.0	122	122	0	0	161	163	0	24	16,920	2,727,878	2,039	6.9	22,270
Analgesics and Anesthetics	0.8	0.3	0.0	0.5	50	38	4	9	66	141	251	19	127,870	8,449,188	14,961	50.4	168,517
Neuromuscular Agents	0.9	0.3	0.2	0.5	79	46	20	12	83	158	123	25	94,599	7,865,552	8,815	29.7	100,038
Nutritional Products	0.5	0.0	0.0	0.5	10	0	0	9	19	120	30	18	17,863	340,432	3,213	10.8	35,438
Hematological Agents	0.7	0.2	0.0	0.4	61	53	2	6	84	214	48	14	42,658	3,573,568	5,261	17.7	58,231
Topical Products	0.5	0.2	0.0	0.2	23	15	2	6	48	76	54	24	69,159	3,319,470	12,703	42.8	145,585
Miscellaneous Products	0.3	0.2	0.0	0.2	72	55	4	13	221	363	202	82	3,217	709,392	857	2.9	9,792
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	26	0	0	0	3,247	84,334	1,103	3.7	12,617
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>1,329,104</b>	<b>98,189,627</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$15,372,942	9,623	32.4 %	109,228	0.7	\$195	\$141
ANTIDEPRESSANTS	8,538,089	18,226	61.5	205,083	0.7	63	42
ULCER DRUGS	7,712,928	12,127	40.9	137,537	0.6	96	56
ANTICONVULSANT	6,927,499	8,204	27.7	93,517	0.8	98	74
ANTIHYPERLIPIDEMIC	6,419,504	9,849	33.2	113,191	0.6	91	57
ANALGESICS - Narcotic	4,359,823	14,890	50.2	167,987	0.4	61	26
ANTIDIABETIC	4,346,847	9,479	32.0	107,695	0.6	71	40
ANTIASTHMATIC	3,958,660	11,458	38.6	130,825	0.4	68	30
ANTIHYPERTENSIVE	3,707,931	12,862	43.4	146,132	0.4	59	25
ANALGESICS - ANTI-INFLAMMATORY	3,182,266	10,015	33.8	116,071	0.4	76	27
Total	64,526,489	116,733		1,327,266	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>731,154</b>	<b>\$64,526,489</b>	<b>9,623</b>	<b>32.4 %</b>	<b>109,228</b>	<b>0.7</b>	<b>\$141</b>	<b>18,226</b>	<b>61.5 %</b>	<b>205,083</b>	<b>0.7</b>	<b>\$42</b>
<b>Female</b>	504,455	42,247,475	5,832	30.2	65,915	0.7	121	12,935	66.9	145,631	0.7	41
<b>Disabled</b>	274,125	25,535,771	3,461	38.6	40,361	0.7	142	7,068	78.9	82,130	0.7	45
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	28	538	0	0.0	0	0.0	0	2	200.0	24	0.5	9
15-20	64	4,585	1	9.1	5	0.8	41	6	54.5	33	0.6	33
21-44	59,910	6,158,436	1,277	56.6	14,868	0.7	140	1,903	84.4	22,068	0.6	47
45-64	137,537	13,023,979	1,637	41.2	19,153	0.8	150	3,683	92.8	42,703	0.7	48
65-74	54,724	4,596,356	346	18.1	4,064	0.7	123	1,064	55.8	12,584	0.6	36
75-84	17,892	1,442,741	152	23.7	1,733	0.7	127	323	50.4	3,756	0.6	33
85 and older	3,970	309,136	48	28.4	538	0.6	97	87	51.5	962	0.7	36
<b>Other Eligibles</b>	230,330	16,711,704	2,371	22.9	25,554	0.6	88	5,867	56.6	63,501	0.7	36
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	547	36,256	12	10.3	75	0.5	68	40	34.5	220	0.7	55
45-64	635	48,102	8	13.3	69	0.8	68	35	58.3	296	0.6	52
65-74	54,747	4,353,619	395	16.4	4,389	0.6	101	1,152	47.9	12,939	0.6	38
75-84	90,897	6,842,514	888	22.8	9,751	0.6	97	2,044	52.5	22,457	0.7	37
85 and older	83,504	5,431,213	1,068	27.4	11,270	0.5	76	2,596	66.5	27,589	0.7	35
<b>Male</b>	226,699	22,279,014	3,791	36.7	43,313	0.8	171	5,291	51.2	59,452	0.6	43
<b>Disabled</b>	165,122	17,767,479	3,119	44.8	36,292	0.8	185	3,889	55.8	44,765	0.6	45
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	80	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	190	23,889	6	28.6	72	0.9	143	8	38.1	96	0.7	33
21-44	58,437	6,998,175	1,539	53.8	17,990	0.8	179	1,722	60.1	19,908	0.6	45
45-64	84,333	8,893,196	1,406	45.4	16,332	0.9	193	1,821	58.8	20,898	0.7	47
65-74	18,379	1,545,321	139	17.6	1,576	0.8	166	277	35.0	3,161	0.6	37
75-84	3,547	288,868	27	15.3	307	0.9	174	60	34.1	690	0.6	32
85 and older	232	17,950	2	10.0	15	0.9	425	1	5.0	12	0.1	0
<b>Other Eligibles</b>	61,577	4,511,535	672	20.0	7,021	0.6	96	1,402	41.7	14,687	0.6	34
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	576	30,013	15	20.8	142	0.6	35	35	48.6	280	0.5	20
45-64	369	28,429	6	9.0	38	0.9	165	10	14.9	91	0.7	48
65-74	22,673	1,803,467	177	13.9	1,991	0.7	116	412	32.3	4,444	0.6	36
75-84	25,925	1,874,075	274	20.8	2,878	0.6	98	560	42.6	5,991	0.7	35
85 and older	12,033	775,538	200	31.7	1,972	0.5	76	385	61.0	3,881	0.7	33
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>12,127</b>	<b>40.9 %</b>	<b>137,537</b>	<b>0.6</b>	<b>\$56</b>	<b>8,204</b>	<b>27.7 %</b>	<b>93,517</b>	<b>0.8</b>	<b>\$74</b>	<b>9,849</b>	<b>33.2 %</b>	<b>113,191</b>	<b>0.6</b>	<b>\$57</b>
<b>Female</b>	8,684	44.9	98,632	0.6	57	5,251	27.2	59,778	0.7	70	6,832	35.3	78,581	0.6	57
<b>Disabled</b>	4,343	48.5	50,640	0.6	59	3,485	38.9	40,541	0.8	79	3,372	37.7	39,440	0.6	57
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	18.2	24	0.6	94	3	27.3	25	0.8	18	0	0.0	0	0.0	0
21-44	829	36.8	9,723	0.5	55	1,170	51.9	13,590	0.8	91	320	14.2	3,748	0.6	47
45-64	2,070	52.1	24,013	0.6	63	1,739	43.8	20,198	0.8	78	1,673	42.1	19,456	0.6	57
65-74	1,012	53.0	11,975	0.6	56	403	21.1	4,749	0.7	61	1,041	54.6	12,271	0.6	59
75-84	333	52.0	3,819	0.6	55	141	22.0	1,648	0.6	37	305	47.6	3,585	0.7	63
85 and older	97	57.4	1,086	0.7	63	29	17.2	331	0.9	68	33	19.5	380	0.7	53
<b>Other Eligibles</b>	4,341	41.8	47,992	0.6	54	1,766	17.0	19,237	0.7	50	3,460	33.4	39,141	0.6	57
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	6	5.2	49	0.6	33	25	21.6	150	0.7	45	3	2.6	13	0.5	43
45-64	12	20.0	97	0.5	43	14	23.3	120	0.6	66	8	13.3	65	0.4	31
65-74	987	41.0	11,256	0.5	52	430	17.9	4,830	0.7	52	1,220	50.7	13,865	0.6	57
75-84	1,630	41.9	18,334	0.6	55	721	18.5	8,040	0.7	53	1,557	40.0	17,763	0.6	57
85 and older	1,706	43.7	18,256	0.7	54	576	14.8	6,097	0.7	46	672	17.2	7,435	0.7	57
<b>Male</b>	3,443	33.3	38,905	0.6	55	2,953	28.6	33,739	0.8	82	3,017	29.2	34,610	0.6	56
<b>Disabled</b>	2,226	31.9	25,732	0.6	57	2,427	34.8	28,135	0.8	87	1,983	28.5	23,059	0.6	56
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	100.0	8	0.5	10	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	4.8	12	2.7	597	2	9.5	24	0.5	106	0	0.0	0	0.0	0
21-44	713	24.9	8,319	0.5	50	1,070	37.4	12,465	0.8	90	502	17.5	5,846	0.6	48
45-64	1,111	35.9	12,752	0.6	62	1,185	38.3	13,674	0.8	88	1,058	34.2	12,219	0.6	58
65-74	317	40.1	3,683	0.6	53	144	18.2	1,665	0.7	68	362	45.8	4,286	0.6	59
75-84	76	43.2	877	0.6	58	23	13.1	274	0.8	92	58	33.0	675	0.7	55
85 and older	7	35.0	81	0.7	34	3	15.0	33	0.5	26	3	15.0	33	0.4	30
<b>Other Eligibles</b>	1,217	36.2	13,173	0.6	51	526	15.6	5,604	0.7	55	1,034	30.7	11,551	0.6	57
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	13	18.1	98	0.5	26	10	13.9	76	0.6	26	6	8.3	50	0.6	37
45-64	6	9.0	45	0.5	29	12	17.9	85	0.7	60	7	10.4	54	0.5	51
65-74	410	32.1	4,530	0.6	52	204	16.0	2,223	0.8	69	473	37.1	5,257	0.6	57
75-84	534	40.6	5,879	0.6	50	207	15.7	2,259	0.7	48	444	33.7	5,070	0.6	58
85 and older	254	40.3	2,621	0.7	50	93	14.7	961	0.7	44	104	16.5	1,120	0.7	55
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANTIASTHMATIC				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>14,890</b>	<b>50.2 %</b>	<b>167,987</b>	<b>0.4</b>	<b>\$26</b>	<b>9,479</b>	<b>32.0 %</b>	<b>107,695</b>	<b>0.6</b>	<b>\$40</b>	<b>11,458</b>	<b>38.6 %</b>	<b>130,825</b>	<b>0.4</b>	<b>\$30</b>
<b>Female</b>	10,342	53.5	116,637	0.4	24	6,757	35.0	76,822	0.6	41	8,322	43.1	95,288	0.4	30
<b>Disabled</b>	6,001	67.0	69,800	0.4	26	3,103	34.7	36,077	0.5	46	4,801	53.6	56,089	0.4	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	9.1	2	3.5	293	0	0.0	0	0.0	0	1	100.0	12	0.3	2
15-20	1,536	68.1	17,907	0.4	23	309	13.7	3,606	0.6	50	995	44.1	11,635	0.4	23
21-44	2,923	73.6	33,798	0.5	30	1,439	36.2	16,606	0.6	48	2,347	59.1	27,326	0.4	30
45-64	1,098	57.5	12,987	0.4	24	1,019	53.4	11,942	0.5	44	1,072	56.2	12,629	0.5	33
65-74	364	56.8	4,240	0.4	20	291	45.4	3,408	0.5	38	328	51.2	3,836	0.5	32
75-84	79	46.7	866	0.4	23	45	26.6	515	0.5	35	58	34.3	651	0.5	35
85 and older	4,341	41.8	46,837	0.4	21	3,654	35.2	40,745	0.6	36	3,521	33.9	39,199	0.5	31
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	25	21.6	136	0.9	30	7	6.0	30	0.6	48	20	17.2	122	0.4	19
21-44	29	48.3	244	0.3	11	6	10.0	26	0.8	38	18	30.0	126	0.8	46
45-64	1,013	42.1	11,454	0.4	20	1,068	44.4	12,031	0.5	41	1,041	43.3	11,915	0.5	33
65-74	1,655	42.5	18,333	0.4	21	1,579	40.6	17,865	0.6	36	1,318	33.9	14,743	0.4	30
75-84	1,619	41.5	16,670	0.4	22	994	25.5	10,793	0.7	30	1,124	28.8	12,293	0.4	30
85 and older															
<b>Male</b>	4,548	44.0	51,350	0.4	31	2,722	26.3	30,873	0.5	40	3,136	30.4	35,537	0.5	31
<b>Disabled</b>	3,368	48.3	38,798	0.4	33	1,623	23.3	18,733	0.5	44	2,099	30.1	24,263	0.5	30
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	23.8	51	0.1	1	0	0.0	0	0.0	0	1	4.8	12	0.1	2
21-44	1,431	50.0	16,611	0.4	28	331	11.6	3,873	0.6	46	653	22.8	7,587	0.4	22
45-64	1,551	50.1	17,750	0.5	41	866	28.0	9,868	0.6	46	980	31.7	11,267	0.5	34
65-74	312	39.4	3,617	0.4	22	355	44.9	4,179	0.5	42	359	45.4	4,188	0.5	34
75-84	62	35.2	699	0.3	16	63	35.8	738	0.4	26	95	54.0	1,078	0.4	29
85 and older	7	35.0	70	0.3	3	8	40.0	75	0.4	27	11	55.0	131	0.4	20
<b>Other Eligibles</b>	1,180	35.1	12,552	0.4	22	1,099	32.7	12,140	0.6	34	1,037	30.8	11,274	0.5	33
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	28	38.9	214	0.5	43	3	4.2	27	0.9	10	7	9.7	51	0.3	20
45-64	14	20.9	99	0.5	37	5	7.5	48	0.6	15	11	16.4	80	0.4	38
65-74	483	37.9	5,346	0.4	28	440	34.5	4,954	0.5	36	381	29.9	4,292	0.5	37
75-84	435	33.1	4,723	0.3	16	480	36.5	5,311	0.6	34	468	35.6	5,067	0.5	31
85 and older	220	34.9	2,170	0.4	19	171	27.1	1,800	0.6	30	170	26.9	1,784	0.4	30
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - ANTI-INFLAMMATORY					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>12,862</b>	<b>43.4 %</b>	<b>146,132</b>	<b>0.4</b>	<b>\$25</b>	<b>10,015</b>	<b>33.8 %</b>	<b>116,071</b>	<b>0.4</b>	<b>\$27</b>	<b>29,659</b>	<b>323,531</b>
<b>Female</b>	9,038	46.8	102,747	0.4	26	7,220	37.4	83,656	0.4	31	19,328	211,428
<b>Disabled</b>	3,589	40.1	41,864	0.4	26	4,284	47.8	50,129	0.4	29	8,955	102,221
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	2	200.0	24	0.6	12	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	11	87
15-20	297	13.2	3,481	0.3	20	995	44.1	11,635	0.3	14	2,255	25,509
21-44	1,604	40.4	18,502	0.4	26	2,033	51.2	23,671	0.4	34	3,970	45,071
45-64	1,180	61.8	13,943	0.4	28	931	48.8	11,009	0.4	29	1,908	22,244
65-74	423	66.0	4,947	0.4	29	270	42.1	3,180	0.4	39	641	7,409
75-84	83	49.1	967	0.5	30	55	32.5	634	0.4	35	169	1,889
85 and older	5,449	52.5	60,883	0.5	26	2,936	28.3	33,527	0.4	35	10,373	109,207
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	4	3.4	32	0.6	34	15	12.9	97	0.3	14	116	364
21-44	9	15.0	60	0.4	41	17	28.3	127	0.4	16	60	311
45-64	1,377	57.3	15,702	0.4	26	852	35.4	9,862	0.3	27	2,405	25,996
65-74	2,213	56.9	25,151	0.5	27	1,210	31.1	14,067	0.4	36	3,891	42,159
75-84	1,846	47.3	19,938	0.6	24	842	21.6	9,374	0.5	41	3,901	40,377
85 and older												
<b>Male</b>	3,824	37.0	43,385	0.4	24	2,795	27.1	32,415	0.3	18	10,331	112,103
<b>Disabled</b>	2,108	30.3	24,422	0.4	25	2,071	29.7	24,169	0.3	15	6,968	78,263
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	8
6-14	2	9.5	24	0.2	26	3	14.3	27	0.1	1	21	178
15-20	446	15.6	5,138	0.3	23	795	27.8	9,244	0.2	14	2,863	32,228
21-44	1,082	34.9	12,482	0.4	25	951	30.7	11,087	0.3	16	3,096	34,576
45-64	468	59.2	5,502	0.4	27	259	32.7	3,074	0.3	18	791	9,049
65-74	102	58.0	1,183	0.3	20	61	34.7	723	0.4	20	176	2,019
75-84	8	40.0	93	0.3	21	2	10.0	14	0.1	12	20	205
85 and older	1,716	51.0	18,963	0.5	23	724	21.5	8,246	0.4	24	3,363	33,840
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
15-20	7	9.7	51	0.7	24	8	11.1	76	0.5	17	72	249
21-44	8	11.9	67	0.6	19	7	10.4	64	0.2	1	67	268
45-64	656	51.4	7,332	0.4	23	289	22.6	3,335	0.3	20	1,276	13,279
65-74	748	56.8	8,392	0.5	23	284	21.6	3,311	0.4	25	1,316	13,925
75-84	297	47.1	3,121	0.6	19	136	21.6	1,460	0.5	35	631	6,115
85 and older												
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

- a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
  - b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
  - c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$361</b>	<b>6.0</b>	<b>4,539</b>	<b>51,078</b>
<b>Age</b>				
0-64	409	4.8	963	11,416
65-74	443	6.6	499	5,751
75-84	386	6.8	1,170	12,949
85 and older	297	6.0	1,907	20,962
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	355	6.2	3,287	36,888
Male	375	5.4	1,252	14,190
Unknown	0	0.0	0	0
<b>Race</b>				
White	369	6	3,340	38,129
African American	405	6.6	97	1,130
Other/unknown	330	6	1,102	11,819
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	338	6.3	3,272	36,098
Disabled	416	5.2	1,267	14,980
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE D.9  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Total Number of Rx	Total Rx \$	Users		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$15	\$9	\$1	\$4	\$50	\$91	\$66	\$23	10,065	\$499,079	2,930	64.6 %	33,441
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.6	0.1	0.0	0.5	79	44	0	35	130	318	61	75	1,426	185,657	217	4.8	2,355
Endocrine/Metabolic Drugs	1.1	0.4	0.1	0.6	43	33	2	8	40	79	27	13	25,280	1,003,777	2,039	44.9	23,159
Cardiovascular Agents	2.0	0.6	0.1	1.4	55	34	2	19	28	62	25	14	69,064	1,907,835	3,092	68.1	34,569
Respiratory Agents	0.8	0.6	0.0	0.1	52	49	1	2	67	79	48	16	12,711	855,054	1,433	31.6	16,450
Gastrointestinal Agents	1.0	0.4	0.0	0.5	66	47	2	17	67	117	40	32	25,647	1,722,675	2,304	50.8	26,180
Genitourinary Agents	0.7	0.5	0.0	0.1	43	38	2	4	66	76	45	31	8,304	544,387	1,097	24.2	12,563
CNS Drugs	1.6	0.7	0.1	0.8	140	111	7	21	89	155	87	28	60,579	5,377,076	3,400	74.9	38,385
Stimulants/Anti-obesity/Anorexia	0.8	0.2	0.0	0.6	40	28	0	12	50	126	0	21	398	19,726	44	1.0	489
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	120	120	0	0	137	138	0	45	9,087	1,247,732	928	20.4	10,398
Analgesics and Anesthetics	0.8	0.4	0.0	0.4	54	49	0	5	65	109	37	13	17,785	1,162,612	1,921	42.3	21,532
Neuromuscular Agents	1.3	0.5	0.2	0.6	114	71	26	18	91	155	118	31	22,626	2,052,491	1,569	34.6	17,952
Nutritional Products	0.6	0.0	0.0	0.6	10	0	1	9	15	6	29	15	6,137	92,567	838	18.5	9,450
Hematological Agents	1.1	0.3	0.1	0.7	56	47	2	7	52	164	27	10	15,563	801,961	1,260	27.8	14,215
Topical Products	0.6	0.2	0.0	0.3	28	18	3	8	45	74	54	23	20,020	910,752	2,785	61.4	32,055
Miscellaneous Products	0.2	0.1	0.0	0.2	12	5	0	7	54	94	0	42	422	22,626	159	3.5	1,836
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	21	0	0	0	912	19,189	232	5.1	2,664
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	306,026	18,425,196	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. Brand-name drugs, sometimes called “innovator single-source drugs,” are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called “innovator multiple-source drugs,” are brand-name drugs whose patents have expired. Generic drugs, sometimes called “non-innovator multiple-source drugs,” are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Rhode Island, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$3,228,994	2,153	47.4 %	24,601	0.7	\$179	\$131
ANTIDEPRESSANTS	1,954,859	3,712	81.8	41,873	0.8	58	47
ANTICONVULSANT	1,802,342	1,634	36.0	18,806	0.9	102	96
ULCER DRUGS	1,449,205	1,941	42.8	22,145	0.8	81	65
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,247,732	1,094	24.1	12,311	0.7	137	101
DERMATOLOGICAL	611,026	3,891	85.7	45,280	0.3	52	13
ANTIHYPERLIPIDEMIC	607,364	867	19.1	9,816	0.9	72	62
ANTIASTHMATIC	589,874	1,367	30.1	15,597	0.5	74	38
ANALGESICS - Narcotic	589,416	1,461	32.2	16,105	0.6	63	37
ANTIDIABETIC	518,949	1,284	28.3	14,578	0.8	42	36
Total	12,599,761	19,404		221,112	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>146,258</b>	<b>\$12,599,761</b>	<b>2,153</b>	<b>47.4 %</b>	<b>24,601</b>	<b>0.7</b>	<b>\$131</b>	<b>3,712</b>	<b>81.8 %</b>	<b>41,873</b>	<b>0.8</b>	<b>\$47</b>
<b>Female</b>	106,188	8,796,102	1,530	46.5	17,403	0.7	120	2,839	86.4	32,080	0.8	45
<b>Disabled</b>	23,496	2,494,408	377	59.7	4,451	0.8	164	465	73.6	5,493	0.9	64
64 or younge <sup>r</sup>	14,780	1,684,425	225	54.1	2,673	0.9	180	280	67.3	3,309	1.0	75
65-74	4,604	471,471	73	68.2	866	0.8	154	92	86.0	1,102	0.8	56
75-84	2,566	206,334	47	69.1	538	0.7	139	57	83.8	660	0.9	44
85 and older	1,546	132,178	32	78.0	374	0.7	107	36	87.8	422	0.8	38
<b>Other Eligibles</b>	82,692	6,301,694	1,153	43.4	12,952	0.7	104	2,374	89.4	26,587	0.8	41
64 or younge <sup>r</sup>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	8,420	701,538	122	66.7	1,380	0.7	139	186	101.6	2,117	0.8	47
75-84	28,788	2,309,236	429	52.3	4,809	0.7	124	746	90.9	8,264	0.8	44
85 and older	45,484	3,290,920	602	36.5	6,763	0.6	83	1,442	87.3	16,206	0.8	38
<b>Male</b>	40,070	3,803,659	623	49.8	7,198	0.8	160	873	69.7	9,793	0.8	53
<b>Disabled</b>	20,146	2,237,696	345	54.3	4,084	0.9	189	352	55.4	4,151	0.9	68
64 or younge <sup>r</sup>	16,994	1,939,201	292	53.4	3,474	0.9	186	296	54.1	3,495	0.9	73
65-74	2,084	202,526	39	61.9	442	1.0	207	40	63.5	464	0.8	46
75-84	1,033	89,408	13	56.5	156	0.9	159	16	69.6	192	0.8	36
85 and older	35	6,561	1	50.0	12	1.1	519	0	0.0	0	0.0	0
<b>Other Eligibles</b>	19,924	1,565,963	278	45.1	3,114	0.7	122	521	84.4	5,642	0.8	42
64 or younge <sup>r</sup>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	5,168	441,933	62	42.5	743	0.9	134	106	72.6	1,224	0.8	45
75-84	8,944	679,448	124	48.1	1,407	0.7	129	213	82.6	2,311	0.8	43
85 and older	5,812	444,582	92	43.2	964	0.6	102	202	94.8	2,107	0.7	39
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>1,634</b>	<b>36.0 %</b>	<b>18,806</b>	<b>0.9</b>	<b>\$96</b>	<b>1,941</b>	<b>42.8 %</b>	<b>22,145</b>	<b>0.8</b>	<b>\$65</b>	<b>1,094</b>	<b>24.1 %</b>	<b>12,311</b>	<b>0.7</b>	<b>\$101</b>
<b>Female</b>	1,079	32.8	12,364	0.9	86	1,436	43.7	16,377	0.8	64	875	26.6	9,847	0.7	103
<b>Disabled</b>	382	60.4	4,527	1.0	123	250	39.6	2,968	0.8	75	96	15.2	1,119	0.8	169
64 or younger	268	64.4	3,185	1.0	136	134	32.2	1,590	0.9	84	50	12.0	575	0.8	226
65-74	64	59.8	755	0.9	112	53	49.5	631	0.8	68	22	20.6	256	0.8	146
75-84	30	44.1	356	0.9	66	39	57.4	459	0.8	61	15	22.1	180	0.6	72
85 and older	20	48.8	231	0.9	75	24	58.5	288	0.8	63	9	22.0	108	0.7	84
<b>Other Eligibles</b>	697	26.3	7,837	0.9	64	1,186	44.7	13,409	0.8	61	779	29.3	8,728	0.7	94
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	105	57.4	1,221	1.0	84	80	43.7	920	0.8	60	43	23.5	478	0.8	96
75-84	278	33.9	3,117	0.9	66	385	46.9	4,368	0.8	62	243	29.6	2,714	0.7	94
85 and older	314	19.0	3,499	0.8	56	721	43.7	8,121	0.8	61	493	29.9	5,536	0.7	95
<b>Male</b>	555	44.3	6,442	1.0	115	505	40.3	5,768	0.8	71	219	17.5	2,464	0.7	95
<b>Disabled</b>	363	57.2	4,330	1.0	134	200	31.5	2,360	0.8	78	42	6.6	492	0.8	97
64 or younger	329	60.1	3,925	1.0	137	159	29.1	1,887	0.9	81	35	6.4	411	0.7	95
65-74	25	39.7	297	1.0	85	26	41.3	293	0.8	58	4	6.3	45	0.8	98
75-84	8	34.8	96	1.1	161	14	60.9	168	0.8	76	3	13.0	36	0.8	108
85 and older	1	50.0	12	0.8	21	1	50.0	12	1.0	7	0	0.0	0	0.0	0
<b>Other Eligibles</b>	192	31.1	2,112	1.0	77	305	49.4	3,408	0.8	66	177	28.7	1,972	0.7	95
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	61	41.8	694	1.1	111	67	45.9	791	0.9	69	21	14.4	240	0.7	146
75-84	85	32.9	960	0.9	64	137	53.1	1,555	0.8	65	77	29.8	852	0.7	91
85 and older	46	21.6	458	0.9	51	101	47.4	1,062	0.8	64	79	37.1	880	0.7	84
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	DERMATOLOGICAL					ANTHYPERLIPIDEMIC					ANTIASTHMATIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>3,891</b>	<b>85.7 %</b>	<b>45,280</b>	<b>0.3</b>	<b>\$14</b>	<b>867</b>	<b>19.1 %</b>	<b>9,816</b>	<b>0.9</b>	<b>\$62</b>	<b>1,367</b>	<b>30.1 %</b>	<b>15,597</b>	<b>0.5</b>	<b>\$38</b>
<b>Female</b>	2,640	80.3	30,667	0.3	13	623	19.0	6,999	0.9	62	1,032	31.4	11,851	0.5	36
<b>Disabled</b>	696	110.1	8,262	0.3	14	144	22.8	1,703	0.9	68	135	21.4	1,609	0.5	41
64 or younger	513	123.3	6,123	0.3	16	81	19.5	963	0.9	72	60	14.4	720	0.4	35
65-74	89	83.2	1,033	0.2	9	44	41.1	521	0.8	64	39	36.4	458	0.6	52
75-84	62	91.2	741	0.2	12	14	20.6	159	0.9	65	20	29.4	239	0.4	35
85 and older	32	78.0	365	0.2	8	5	12.2	60	0.8	43	16	39.0	192	0.6	47
<b>Other Eligibles</b>	1,944	73.2	22,405	0.2	13	479	18.0	5,296	0.9	60	897	33.8	10,242	0.5	36
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	157	85.8	1,815	0.3	13	67	36.6	754	0.9	69	82	44.8	975	0.6	48
75-84	632	77.0	7,312	0.3	12	205	25.0	2,261	0.9	59	286	34.8	3,217	0.5	36
85 and older	1,155	70.0	13,278	0.2	14	207	12.5	2,281	0.8	57	529	32.0	6,050	0.5	34
<b>Male</b>	1,251	99.9	14,613	0.3	14	244	19.5	2,817	0.8	63	335	26.8	3,746	0.6	43
<b>Disabled</b>	727	114.5	8,637	0.3	15	136	21.4	1,615	0.8	65	117	18.4	1,355	0.6	52
64 or younger	621	113.5	7,381	0.3	15	112	20.5	1,327	0.8	63	89	16.3	1,029	0.6	48
65-74	68	107.9	800	0.3	10	18	28.6	216	0.9	73	20	31.7	230	0.5	53
75-84	38	165.2	456	0.6	27	6	26.1	72	0.9	65	8	34.8	96	1.1	83
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	524	84.9	5,976	0.3	12	108	17.5	1,202	0.8	61	218	35.3	2,391	0.5	38
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	133	91.1	1,562	0.3	12	31	21.2	348	0.9	73	43	29.5	497	0.7	59
75-84	231	89.5	2,624	0.3	13	52	20.2	598	0.8	58	100	38.8	1,092	0.5	30
85 and older	160	75.1	1,790	0.2	11	25	11.7	256	0.8	50	75	35.2	802	0.5	35
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
<b>All</b>	<b>1,461</b>	<b>32.2 %</b>	<b>16,105</b>	<b>0.6</b>	<b>\$37</b>	<b>1,284</b>	<b>28.3 %</b>	<b>14,578</b>	<b>0.8</b>	<b>\$36</b>	<b>4,539</b>	<b>51,078</b>
<b>Female</b>	1,201	36.5	13,246	0.6	38	975	29.7	11,054	0.8	35	3,287	36,888
<b>Disabled</b>	174	27.5	2,019	0.6	40	126	19.9	1,458	0.9	44	632	7,458
64 or younger	88	21.2	1,020	0.6	41	50	12.0	583	0.9	52	416	4,934
65-74	36	33.6	428	0.6	47	48	44.9	566	0.8	45	107	1,266
75-84	29	42.6	338	0.7	15	19	27.9	219	0.8	25	68	785
85 and older	21	51.2	233	0.6	60	9	22.0	90	1.0	34	41	473
<b>Other Eligibles</b>	1,027	38.7	11,227	0.6	38	849	32.0	9,596	0.8	34	2,655	29,430
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	72	39.3	812	0.9	58	84	45.9	954	0.9	38	183	2,085
75-84	325	39.6	3,557	0.6	43	341	41.5	3,823	0.9	34	821	9,064
85 and older	630	38.2	6,858	0.5	33	424	25.7	4,819	0.8	32	1,651	18,281
<b>Male</b>	260	20.8	2,859	0.5	30	309	24.7	3,524	0.8	38	1,252	14,190
<b>Disabled</b>	83	13.1	960	0.5	24	86	13.5	1,015	0.8	50	635	7,522
64 or younger	67	12.2	794	0.4	26	71	13.0	838	0.8	54	547	6,482
65-74	12	19.0	118	0.6	17	13	20.6	153	0.7	34	63	740
75-84	4	17.4	48	0.3	5	2	8.7	24	0.8	11	23	276
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
<b>Other Eligibles</b>	177	28.7	1,899	0.6	33	223	36.1	2,509	0.8	33	617	6,668
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	48	32.9	564	0.5	40	50	34.2	578	1.0	44	146	1,660
75-84	62	24.0	672	0.6	29	113	43.8	1,279	0.8	29	258	2,824
85 and older	67	31.5	663	0.5	30	60	28.2	652	0.8	32	213	2,184
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 2,676 beneficiaries who were in nursing facilities for part of their enrollment and their 25,220 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.11  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
RHODE ISLAND, 2004

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
<b>All</b>	<b>16,698</b>	<b>56.3 %</b>	<b>5.0</b>	<b>148,869</b>	<b>\$63</b>	<b>\$1,862,118</b>	<b>\$13</b>	<b>1.9 %</b>	<b>29,659</b>
<b>Age</b>									
5 and younger	0	0.0	0.0	0	0	0	0	0.0	0
6-14	1	50.0	5.5	11	89	178	16	7.8	2
15-20	5	15.2	0.6	19	6	191	10	0.5	33
21-44	2,678	50.5	4.3	23,076	64	339,546	15	1.8	5,306
45-64	4,490	62.4	6.3	45,602	91	652,036	14	2.0	7,193
65-74	3,572	56.0	4.7	29,830	56	358,822	12	2.0	6,380
75-84	3,276	54.4	4.6	27,859	48	287,987	10	1.7	6,024
85 and older	2,676	56.7	4.8	22,472	47	223,358	10	1.9	4,721
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	7,148	53.4	4.3	57,779	46	617,599	11	1.8	13,390
Disabled	9,451	59.4	5.7	90,634	78	1,238,342	14	2.0	15,923
Adults	89	27.1	1.2	383	15	5,042	13	2.2	328
Children	2	66.7	6.3	19	72	216	11	3.5	3
Unknown	8	53.3	3.6	54	61	919	17	1.2	15
<b>Gender</b>									
Female	11,736	60.7	5.5	106,981	70	1,347,022	13	2.1	19,328
Male	4,962	48.0	4.1	41,888	50	515,096	12	1.5	10,331
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	11,218	58.9	5.8	110,092	75	1,429,414	13	2.0	19,060
African American	951	52.9	3.8	6,858	42	75,909	11	1.4	1,798
Other/unknown	4,529	51.5	3.6	31,919	41	356,795	11	1.6	8,801
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	2,763	60.9	7.0	31,631	65	292,983	9	1.6	4,539
Part year	1,770	66.1	5.2	13,934	61	162,966	12	1.9	2,676
None	12,165	54.2	4.6	103,304	63	1,406,169	14	2.0	22,444
<b>Maintenance Assistance Status</b>									
Cash	8,937	57.2	5.0	78,872	63	986,950	13	2.0	15,619
Medically needy	163	62.7	6.1	1,581	72	18,733	12	1.7	260
Poverty related	59	37.6	1.8	288	26	4,110	14	1.7	157
Other/unknown	7,539	55.3	5.0	68,128	63	852,325	13	1.8	13,623

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
RHODE ISLAND, 2004

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.5</b>	<b>\$6</b>	<b>\$13</b>	<b>\$0</b>	<b>\$2</b>	<b>323,531</b>
<b>Age</b>						
5 and younger	0.0	0	0	0	0	0
6-14	0.6	9	16	0	2	20
15-20	0.1	1	10	0	1	269
21-44	0.4	6	15	0	3	58,350
45-64	0.6	8	14	0	4	80,226
65-74	0.4	5	12	0	2	70,568
75-84	0.4	4	10	0	2	65,512
85 and older	0.5	5	10	0	1	48,586
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.4	4	11	0	2	141,744
Disabled	0.5	7	14	0	3	180,484
Adults	0.3	4	13	0	2	1,131
Children	0.7	8	11	0	3	26
Unknown	0.4	6	17	0	3	146
<b>Gender</b>						
Female	0.5	6	13	0	3	211,428
Male	0.4	5	12	0	2	112,103
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.5	7	13	0	3	210,635
African American	0.3	4	11	0	1	19,761
Other/unknown	0.3	4	11	0	1	93,135
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	6	9	0	2	51,078
Part year	0.6	6	12	0	2	25,220
None	0.4	6	14	0	3	247,233
<b>Maintenance Assistance Status</b>						
Cash	0.4	6	13	0	2	177,483
Medically needy	0.6	7	12	0	2	2,724
Poverty related	0.2	3	14	0	2	1,626
Other/unknown	0.5	6	13	0	2	141,698

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE D.13  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
RHODE ISLAND, 2004

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>25,404</b>	<b>\$73</b>	<b>\$1,862,118</b>	<b>100.0 %</b>	<b>148,869</b>	<b>\$13</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	16	332	5,315	0.3	58	92	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	25	19	479	0.0	52	9	0.0
Cough and cold medications	3,721	76	283,113	15.2	10,022	28	6.7
Vitamins and minerals	3,123	103	321,139	17.2	17,671	18	11.9
Non-prescription drugs	9,925	28	282,694	15.2	60,173	5	40.4
Barbiturates	246	76	18,641	1.0	2,714	7	1.8
Benzodiazepines	7,485	106	794,405	42.7	53,827	15	36.2
Other Part D Excl Rx Drugs	863	181	156,332	8.4	4,352	36	2.9

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 RHODE ISLAND, 2004

Total Number of Dual Eligible Beneficiaries	29,659
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries	\$98,189,627
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary	\$3,311

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,133	10.6 %	\$0	0.0 %
1-500	4,233	14.3	891,283	0.9
501-1,000	2,708	9.1	2,021,546	2.1
1,001-1,500	2,379	8.0	2,963,837	3.0
1,501-2,000	2,143	7.2	3,745,784	3.8
2,001-2,500	1,905	6.4	4,278,571	4.4
2,501-3,000	1,753	5.9	4,825,589	4.9
3,001-3,500	1,450	4.9	4,704,552	4.8
3,501-4,000	1,319	4.4	4,932,365	5.0
4,001-4,500	1,136	3.8	4,821,655	4.9
4,501-5,000	940	3.2	4,458,225	4.5
5,001-5,500	888	3.0	4,651,334	4.7
5,501-6,000	714	2.4	4,103,282	4.2
6,001-6,500	635	2.1	3,967,942	4.0
6,501-7,000	541	1.8	3,651,178	3.7
7,001-7,500	458	1.5	3,318,539	3.4
7,501-8,000	395	1.3	3,060,121	3.1
8,001-8,500	326	1.1	2,684,214	2.7
8,501-9,000	281	0.9	2,456,940	2.5
9,001-9,500	231	0.8	2,136,739	2.2
9,501-10,000	237	0.8	2,309,813	2.4
10,001+	1,854	6.3	28,206,118	28.7

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 RHODE ISLAND, 2004

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65	12,218
Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65	\$50,377,307
Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65	\$4,123

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries, Age < 65	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,387	11.4 %	0	0.0 %
1-500	1,839	15.1	371,051	0.7
501-1,000	937	7.7	696,591	1.4
1,001-1,500	831	6.8	1,035,838	2.1
1,501-2,000	708	5.8	1,242,346	2.5
2,001-2,500	650	5.3	1,458,153	2.9
2,501-3,000	562	4.6	1,547,286	3.1
3,001-3,500	489	4.0	1,587,904	3.2
3,501-4,000	453	3.7	1,696,378	3.4
4,001-4,500	429	3.5	1,822,353	3.6
4,501-5,000	375	3.1	1,775,085	3.5
5,001-5,500	347	2.8	1,820,873	3.6
5,501-6,000	288	2.4	1,653,839	3.3
6,001-6,500	279	2.3	1,744,474	3.5
6,501-7,000	246	2.0	1,662,469	3.3
7,001-7,500	210	1.7	1,522,956	3.0
7,501-8,000	198	1.6	1,537,289	3.1
8,001-8,500	171	1.4	1,409,961	2.8
8,501-9,000	154	1.3	1,346,321	2.7
9,001-9,500	137	1.1	1,266,264	2.5
9,501-10,000	154	1.3	1,501,678	3.0
10,001+	1,374	11.2	21,678,198	43.0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 RHODE ISLAND, 2004

Total Number of Dual Eligible Beneficiaries, Age 65+	17,125
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+	\$47,525,800
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+	\$2,775

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,616	9.4 %	0	0.0 %
1-500	2,304	13.5	508,083	1.1
501-1,000	1,740	10.2	1,303,210	2.7
1,001-1,500	1,531	8.9	1,906,586	4.0
1,501-2,000	1,428	8.3	2,491,725	5.2
2,001-2,500	1,253	7.3	2,815,906	5.9
2,501-3,000	1,184	6.9	3,258,776	6.9
3,001-3,500	956	5.6	3,100,219	6.5
3,501-4,000	862	5.0	3,221,010	6.8
4,001-4,500	702	4.1	2,978,258	6.3
4,501-5,000	563	3.3	2,673,737	5.6
5,001-5,500	537	3.1	2,809,304	5.9
5,501-6,000	424	2.5	2,437,991	5.1
6,001-6,500	356	2.1	2,223,468	4.7
6,501-7,000	292	1.7	1,968,495	4.1
7,001-7,500	247	1.4	1,788,099	3.8
7,501-8,000	196	1.1	1,515,240	3.2
8,001-8,500	154	0.9	1,265,974	2.7
8,501-9,000	127	0.7	1,110,619	2.3
9,001-9,500	94	0.5	870,475	1.8
9,501-10,000	83	0.5	808,135	1.7
10,001+	476	2.8	6,470,490	13.6

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 <sup>a, b</sup>  
 RHODE ISLAND, 2004

Total Number of Dual Eligible Beneficiaries, Age 65-74	6,380
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74	\$18,324,042
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74	\$2,872

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	737	11.6 %	0	0.0 %
1-500	876	13.7	183,955	1.0
501-1,000	615	9.6	458,178	2.5
1,001-1,500	574	9.0	715,719	3.9
1,501-2,000	493	7.7	857,283	4.7
2,001-2,500	406	6.4	911,485	5.0
2,501-3,000	412	6.5	1,133,286	6.2
3,001-3,500	313	4.9	1,014,979	5.5
3,501-4,000	323	5.1	1,209,683	6.6
4,001-4,500	236	3.7	1,000,398	5.5
4,501-5,000	186	2.9	884,973	4.8
5,001-5,500	188	2.9	982,825	5.4
5,501-6,000	160	2.5	920,771	5.0
6,001-6,500	122	1.9	763,050	4.2
6,501-7,000	103	1.6	694,959	3.8
7,001-7,500	97	1.5	702,154	3.8
7,501-8,000	85	1.3	657,872	3.6
8,001-8,500	65	1.0	535,042	2.9
8,501-9,000	60	0.9	524,331	2.9
9,001-9,500	43	0.7	399,366	2.2
9,501-10,000	40	0.6	389,248	2.1
10,001+	246	3.9	3,384,485	18.5

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 RHODE ISLAND, 2004

Total Number of Dual Eligible Beneficiaries, Age 75-84	6,024
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84	\$17,130,223
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84	\$2,844

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	592	9.8 %	0	0.0 %
1-500	716	11.9	159,625	0.9
501-1,000	574	9.5	430,303	2.5
1,001-1,500	518	8.6	652,160	3.8
1,501-2,000	532	8.8	930,535	5.4
2,001-2,500	463	7.7	1,041,545	6.1
2,501-3,000	427	7.1	1,171,498	6.8
3,001-3,500	351	5.8	1,139,316	6.7
3,501-4,000	304	5.0	1,137,585	6.6
4,001-4,500	245	4.1	1,040,747	6.1
4,501-5,000	215	3.6	1,022,535	6.0
5,001-5,500	203	3.4	1,062,853	6.2
5,501-6,000	155	2.6	890,723	5.2
6,001-6,500	133	2.2	830,324	4.8
6,501-7,000	101	1.7	681,655	4.0
7,001-7,500	103	1.7	744,871	4.3
7,501-8,000	66	1.1	510,400	3.0
8,001-8,500	53	0.9	435,834	2.5
8,501-9,000	39	0.6	340,776	2.0
9,001-9,500	41	0.7	378,307	2.2
9,501-10,000	30	0.5	291,908	1.7
10,001+	163	2.7	2,236,723	13.1

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 RHODE ISLAND, 2004

Total Number of Dual Eligible Beneficiaries, Age 85+	4,721
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+	\$12,071,535
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+	\$2,557

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	287	6.1 %	0	0.0 %
1-500	712	15.1	164,503	1.4
501-1,000	551	11.7	414,729	3.4
1,001-1,500	439	9.3	538,707	4.5
1,501-2,000	403	8.5	703,907	5.8
2,001-2,500	384	8.1	862,876	7.1
2,501-3,000	345	7.3	953,992	7.9
3,001-3,500	292	6.2	945,924	7.8
3,501-4,000	235	5.0	873,742	7.2
4,001-4,500	221	4.7	937,113	7.8
4,501-5,000	162	3.4	766,229	6.3
5,001-5,500	146	3.1	763,626	6.3
5,501-6,000	109	2.3	626,497	5.2
6,001-6,500	101	2.1	630,094	5.2
6,501-7,000	88	1.9	591,881	4.9
7,001-7,500	47	1.0	341,074	2.8
7,501-8,000	45	1.0	346,968	2.9
8,001-8,500	36	0.8	295,098	2.4
8,501-9,000	28	0.6	245,512	2.0
9,001-9,500	10	0.2	92,802	0.8
9,501-10,000	13	0.3	126,979	1.1
10,001+	67	1.4	849,282	7.0

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

APPENDIX TABLE A.3  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>30,885</b>	<b>13,391</b>	<b>15,968</b>	<b>1,505</b>	<b>6</b>	<b>15</b>	<b>339,533</b>	<b>141,859</b>	<b>181,938</b>	<b>15,520</b>	<b>70</b>	<b>146</b>
<b>Age</b>												
5 and younger	0	0	0	0	0	0		0	0	0	0	0
6-14	3	0	3	0	0	0	36	0	36	0	0	0
15-20	55	0	52	0	3	0	588	0	552	0	36	0
21-44	5,976	0	5,138	833	2	3	67,245	0	58,485	8,710	24	26
45-64	7,647	1	7,070	567	0	9	85,949	12	80,048	5,796	0	93
65-74	6,450	3,656	2,699	91	1	3	71,517	39,279	31,295	906	10	27
75-84	6,031	5,204	817	10	0	0	65,591	56,078	9,428	85	0	0
85 and older	4,723	4,530	189	4	0	0	48,607	46,490	2,094	23	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Gender</b>												
Female	19,961	10,186	8,981	778	1	15	219,917	108,529	103,082	8,148	12	146
Male	10,924	3,205	6,987	727	5	0	119,616	33,330	78,856	7,372	58	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Race</b>												
White	19,781	7,942	10,948	874	2	15	219,947	84,921	125,796	9,060	24	146
African American	1,894	477	1,298	118	1	0	21,034	5,256	14,566	1,200	12	0
Other/unknown	9,210	4,972	3,722	513	3	0	98,552	51,682	41,576	5,260	34	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	4,539	3,272	1,267	0	0	0	51,078	36,098	14,980	0	0	0
Part year	2,676	2,091	585	0	0	0	25,227	19,005	6,222	0	0	0
None	23,670	8,028	14,116	1,505	6	15	263,228	86,756	160,736	15,520	70	146
<b>Maintenance Assistance Status</b>												
Cash	15,702	4,659	10,986	57	0	0	179,221	52,018	126,586	617	0	0
Medically needy	260	163	97	0	0	0	2,744	1,690	1,054	0	0	0
Poverty related	161	68	73	4	1	15	1,683	721	780	24	12	146
Other/unknown	14,762	8,501	4,812	1,444	5	0	155,885	87,430	53,518	14,879	58	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	30,423	13,087	15,815	1,500	6	15	334,451	138,542	180,229	15,464	70	146
Full dual, part year	462	304	153	5	0	0	5,082	3,317	1,709	56	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	29,170	13,366	15,749	38	2	15	321,404	141,596	179,397	243	22	146
FFS part year, with Rx claims	331	21	148	161	1	0	3,662	230	1,722	1,698	12	0
FFS part year, no Rx claims	158	3	26	129	0	0	1,379	29	289	1,061	0	0
MC all year, with Rx claims	102	1	5	96	0	0	1,103	4	60	1,039	0	0
MC all year, no Rx claims	1,124	0	40	1,081	3	0	11,985	0	470	11,479	36	0



Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

- a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2004. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>30,885</b>	<b>339,533</b>	<b>29,659</b>	<b>323,531</b>	<b>0</b>	<b>16,002</b>
Fee-for-service (FFS) all year	29,170	321,404	29,170	321,404	0	0
FFS part year, with Rx claims	331	3,662	331	1,752	0	1,910
FFS part year, with no Rx claims	158	1,379	158	375	0	1,004
Managed care (MC) all year, with Rx claims	102	1,103	0	0	0	1,103
MC all year, with no Rx claims	1,124	11,985	0	0	0	11,985

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.